

Filing Fee \$20.00

LIMITED PARTNERSHIP

STATE OF MAINE

**TERMINATION OF STATEMENT OF
INTENTION TO DO BUSINESS
UNDER AN ASSUMED OR
FICTITIOUS NAME**

(Real Name of Limited Partnership)

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 31 MRSA §405-A.8, the undersigned limited partnership executes and delivers the following Termination of Statement of Intention to do Business Under an Assumed or Fictitious Name:

FIRST: The limited partnership no longer intends to transact business under an assumed or fictitious name.

SECOND: The limited partnership intends to terminate the assumed or fictitious name of

_____.

GENERAL PARTNER(S)*

DATED _____

(signature)

(type or print name)

For General Partner(s) which are Entities

Name of Entity _____

By _____
(authorized signature)

(type or print name and capacity)

*Certificate **MUST** be signed by at least one **general partner**.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under [Title 17-A, section 453](#).

Please remit your payment made payable to the Maine Secretary of State.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**